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JUN 26 2006

TD Foster™ Intellectual property law
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San Diego, CA 92130
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Thomas D. Foster, Patent Attorney

Via Facsimile

June 26, 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Appl No.: 10/607,093
Filed: 25 June 2003
Inventor: LEISHER, Steven
Our Ref.: 6057.003-01

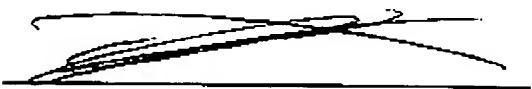
Sir:

The following documents are forwarded herewith for appropriate action by the United States Patent and Trademark Office:

1. Information Disclosure Statement
2. PTO/SB/08B Form with two non patent literature documents
3. Completed PTO/SB/17 Form (Fee Transmittal)
4. Completed PTO/SB/21 Form (Transmittal Form)

Prompt action is respectfully requested.

Respectfully Submitted,
TDFoster - Intellectual Property/Litigation/Corporate Law


Thomas D. Foster, Esq.
Attorney of Record
Registration No. 44,686

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0551-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 7

Application Number	10/607,093
Filing Date	25 June 2003
First Named Inventor	LEISHER, Steven
Art Unit	3626
Examiner Name	BLECK, CAROLYN M
RECEIVED CENTRAL FAX CENTER JUN 26 2006	
Attorney Docket Number	8057.003-01

ENCLOSURES (Check all that apply)

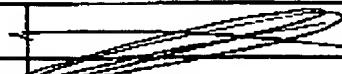
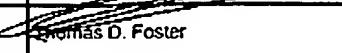
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD. Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
1) Cover letter 2) Form PTO/SB/08B		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	TDFoster		
Signature			
Printed name	Thomas D. Foster		
Date	26 June 2006	Reg. No.	44686

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature Typed or printed name 

Date 26 June 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (01-06)

Approved for use through 07/31/2005, OMB 0551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).
FEE TRANSMITTAL
 For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
 0.00

Complete if Known

Application Number	10/607,093	RECEIVED
Filing Date	25 June 2003	CENTRAL FAX CENTER
First Named Inventor	LEISHER, Steven	JUN 26 2006
Examiner Name	BLECK, CAROLYN M	
Art Unit	3626	
Attorney Docket No.	6057.003-01	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Nonc Other (please identify): _____

Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
 under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

200

100

360

180

Multiple dependent claims

Multiple Dependent ClaimsFee (\$)Fee Paid (\$)

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

<u>Signature</u>	<u>Registration No.</u> 44686 (Attorney/Agent)	<u>Telephone</u> 858.922.2170
<u>Name (Print/Type)</u> Thomas D. Foster	<u>Date</u> 26 June 2006	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JUN 26 2006

Patent
Docket Number: 6057.003-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)
LEISHER, et al.) Examiner: BLECK, CAROLYN M
Application No.: 10/607,093) Art Unit: 3626
Filed: 25 June 2003)
For: METHOD, SYSTEM AND APPARATUS)
FOR FORMING AN INSURANCE PROGRAM)

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313

Sir:

INFORMATION DISCLOSURE STATEMENT

Applicant respectfully submits this information disclosure statement for the above referenced U.S. Patent Application. This statement is filed before the First Office Action on the merits. Thus, no fee is deemed necessary.

Respectfully submitted,

Date: 26 June 2006



Thomas D. Foster, Esq.

Reg. No. 44686

TD Foster
12760 High Bluff Drive, Suite 300
San Diego, CA 92130
Phone: 858.922.2170
Fax: 858.259.6008

JUN 26 2006

PTO/SB/088 (07-05)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<p>Under the Paperwork Reduction Act of 1995, no persons are required to respond to or from this collection of information unless it displays a currently valid OMB control number.</p> <p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(Use as many sheets as necessary)</p>				Complete if Known	
				Application Number	10/607,093
				Filing Date	25 June 2003
				First Named Inventor	LEISHER, Steven
				Art Unit	3626
				Examiner Name	BLECK, CAROLYN M
Sheet	1	of	1	Attorney Docket Number	6057.003-01

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not
considered. Include copy of this form with any communication to applicant.

considered. Include copy of this form with next communication to applicant.
1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.
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